

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Gun Owners Action Fund

ADDRESS (number and street)

610 S. Boulevard

Check if different
than previously
reported. (ACC)

Tampa

FL

33606

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00764522

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M / D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☒ Runoff (30R) ☐ Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

in the
State of

GA

5. Covering Period

M M / D D / Y Y Y Y Y Y
01 01 2021

through

M M / D D / Y Y Y Y Y Y
01 25 2021

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Watkins, Nancy, H., ,

Type or Print Name of Treasurer

Signature of Treasurer

Watkins, Nancy, H., ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
02 04 2021

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Gun Owners Action Fund

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
01		01		2021

To:

M M	/	D D	/	Y Y Y Y Y
01		25		2021

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div><div>Y Y Y Y Y</div><div>2021</div></div>		<div><div></div><div>281096.00</div></div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div><div></div><div>281096.00</div></div>	
(c) Total Receipts (from Line 19)	<div><div></div><div>110000.00</div></div>	<div><div></div><div>110000.00</div></div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div><div></div><div>391096.00</div></div>	<div><div></div><div>391096.00</div></div>
7. Total Disbursements (from Line 31).....	<div><div></div><div>132398.32</div></div>	<div><div></div><div>132398.32</div></div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<div><div></div><div>258697.68</div></div>	<div><div></div><div>258697.68</div></div>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<div><div></div><div>0.00</div></div>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<div><div></div><div>0.00</div></div>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Gun Owners Action Fund

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
01	/	01	/	2021

To:

M M	/	D D	/	Y Y Y Y Y
01	/	25	/	2021

I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

110000.00

110000.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

110000.00

110000.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

110000.00

110000.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))

110000.00

110000.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

110000.00

110000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	132398.32	132398.32
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	132398.32	132398.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	132398.32	132398.32

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	110000.00	110000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	110000.00	110000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	0.00	0.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 12

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Gun Owners Action Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Daniel Defense, LLC

Mailing Address 101 Warfighter Way

City

Black Creek

State

GA

Zip Code

31308

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 06 / 2021

Transaction ID : SA11AI.4228

Amount of Each Receipt this Period

100000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Luth-Ar, LLC

Mailing Address 33112 12th Street, S.E.

City

St. Cloud

State

MN

Zip Code

56304

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 04 / 2021

Transaction ID : SA11AI.4217

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

110000.00

TOTAL This Period (last page this line number only).....▶

110000.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 7 OF 12
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Gun Owners Action Fund				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00764522 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item Impact Advertising, LLC				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div>	
Mailing Address 1870 E 3355 S				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">20000.00</div>	
City Salt Lake City		State UT		Zip Code 84106	
Purpose of Expenditure digital advertising				Category/Type 	
Name of Federal Candidate: Ossoff, T. Jonathan, , ,				Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	
Full Name of Payee <input type="checkbox"/> Memo Item Impact Advertising, LLC				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div>	
Mailing Address 1870 E 3355 S				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">20000.00</div>	
City Salt Lake City		State UT		Zip Code 84106	
Purpose of Expenditure digital advertising				Category/Type 	
Name of Federal Candidate: Warnock, Raphael, , ,				Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;">40000.00</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (b) SUBTOTAL of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (c) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Watkins, Nancy, H., ,</u>				Date MM / DD / YYYY	
[Electronically Filed]				<div style="display: flex; justify-content: space-between;"> 02 04 2021 </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 8 OF 12
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Gun Owners Action Fund				FEC IDENTIFICATION NUMBER ▼ C C00764522	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Ring Limited <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 01 / 02 / 2021		
Mailing Address P. O. Box 207			Amount 9848.10		
City Dublin	State OH	Zip Code 43017	Transaction ID : SE.4198 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 01 / 04 / 2021		
Purpose of Expenditure voter contact-text & phones		Category/ Type 			
Name of Federal Candidate: Loeffler, Kelly, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA		
Calendar Year-To-Date Per Election for Office Sought		9848.10	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff		
Full Name of Payee Ring Limited <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 01 / 02 / 2021		
Mailing Address P. O. Box 207			Amount 9848.09		
City Dublin	State OH	Zip Code 43017	Transaction ID : SE.4199 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 01 / 04 / 2021		
Purpose of Expenditure voter contact-text & phones		Category/ Type 			
Name of Federal Candidate: Perdue, David, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA		
Calendar Year-To-Date Per Election for Office Sought		19696.19	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff		
(a) SUBTOTAL of Itemized Independent Expenditures			19696.19		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			 		
(c) TOTAL Independent Expenditures			 		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Watkins, Nancy, H., , Signature		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 02 / 04 / 2021	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 9 OF 12
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Gun Owners Action Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00764522 </div>
--	--

 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Ring Limited			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M M /</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">D D D /</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">Y Y Y Y Y Y</div> </div>	
Mailing Address P. O. Box 207			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">9848.09</div>	
City Dublin	State OH	Zip Code 43017	Transaction ID : SE.4200 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 150px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M M /</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">D D D /</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure voter contact-text & phones		Category/ Type <div style="border: 1px solid black; width: 50px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div>	<div style="display: flex; justify-content: space-between; width: 150px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M M /</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">D D D /</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Ossoff, T. Jonathan, , ,			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>GA</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">29544.28</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Runoff</u>	

Full Name of Payee <input type="checkbox"/> Memo Item Ring Limited			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M M /</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">D D D /</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">Y Y Y Y Y Y</div> </div>	
Mailing Address P. O. Box 207			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">9848.09</div>	
City Dublin	State OH	Zip Code 43017	Transaction ID : SE.4201 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 150px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M M /</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">D D D /</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure voter contact-text & phones		Category/ Type <div style="border: 1px solid black; width: 50px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div>	<div style="display: flex; justify-content: space-between; width: 150px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M M /</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">D D D /</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Warnock, Raphael, , ,			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>GA</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">39392.37</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Runoff</u>	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	19696.18
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Watkins, Nancy, H., ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 10 OF 12
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Gun Owners Action Fund				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00764522 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on				<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y / / / </div>	
Full Name of Payee Ring Limited			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 01 04 2021 </div>
Mailing Address P. O. Box 207			Amount		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 15286.20 </div>
City Dublin	State OH	Zip Code 43017	Transaction ID : SE.4212 Date of Disbursement or Obligation		
Purpose of Expenditure voter contact-text messaging			Category/ Type		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 01 04 2021 </div>
Name of Federal Candidate: Loeffler, Kelly, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 94678.57 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff
Full Name of Payee Ring Limited			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 01 04 2021 </div>
Mailing Address P. O. Box 207			Amount		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 15286.20 </div>
City Dublin	State OH	Zip Code 43017	Transaction ID : SE.4213 Date of Disbursement or Obligation		
Purpose of Expenditure voter contact-text messaging			Category/ Type		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 01 04 2021 </div>
Name of Federal Candidate: Perdue, David, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 109964.77 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff
(a) SUBTOTAL of Itemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 30572.40 </div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				<div style="border: 1px solid black; padding: 2px; display: inline-block;"> / / / </div>	
(c) TOTAL Independent Expenditures				<div style="border: 1px solid black; padding: 2px; display: inline-block;"> / / / </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Watkins, Nancy, H., ,</u>			Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 02 04 2021 </div>		[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 11 OF 12
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Gun Owners Action Fund				FEC IDENTIFICATION NUMBER ▼ C C00764522	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Ring Limited			Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 05 / 2021		
Mailing Address P. O. Box 207			Amount 2264.63		
City Dublin	State OH	Zip Code 43017	Transaction ID : SE.4218		
Purpose of Expenditure voter contact-phone calls		Category/ Type 	Date of Disbursement or Obligation MM / DD / YYYY 01 / 05 / 2021		
Name of Federal Candidate: Loeffler, Kelly, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: 00 State: GA		
Calendar Year-To-Date Per Election for Office Sought 112229.40			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff		
Full Name of Payee Ring Limited			Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 05 / 2021		
Mailing Address P. O. Box 207			Amount 2264.62		
City Dublin	State OH	Zip Code 43017	Transaction ID : SE.4219		
Purpose of Expenditure voter contact-phone calls		Category/ Type 	Date of Disbursement or Obligation MM / DD / YYYY 01 / 05 / 2021		
Name of Federal Candidate: Perdue, David, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: 00 State: GA		
Calendar Year-To-Date Per Election for Office Sought 114494.02			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff		
(a) SUBTOTAL of Itemized Independent Expenditures			4529.25		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			 		
(c) TOTAL Independent Expenditures			 		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Watkins, Nancy, H., ,</u> _____		[Electronically Filed]		Date MM / DD / YYYY 02 / 04 / 2021	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 12 OF 12
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Gun Owners Action Fund				FEC IDENTIFICATION NUMBER ▼ C C00764522	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Ring Limited <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 05 / 2021		
Mailing Address P. O. Box 207			Amount 8952.15		
City Dublin	State OH	Zip Code 43017	Transaction ID : SE.4220		
Purpose of Expenditure voter contact-text & phone calls		Category/ Type 	Date of Disbursement or Obligation MM / DD / YYYY 01 / 05 / 2021		
Name of Federal Candidate: Loeffler, Kelly, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA		
Calendar Year-To-Date Per Election for Office Sought		123446.17	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff		
Full Name of Payee Ring Limited <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 05 / 2021		
Mailing Address P. O. Box 207			Amount 8952.15		
City Dublin	State OH	Zip Code 43017	Transaction ID : SE.4221		
Purpose of Expenditure voter contact-text & phone calls		Category/ Type 	Date of Disbursement or Obligation MM / DD / YYYY 01 / 05 / 2021		
Name of Federal Candidate: Perdue, David, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA		
Calendar Year-To-Date Per Election for Office Sought		132398.32	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff		
(a) SUBTOTAL of Itemized Independent Expenditures			17904.30		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			 		
(c) TOTAL Independent Expenditures			132398.32		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Watkins, Nancy, H., ,		[Electronically Filed]		Date MM / DD / YYYY 02 / 04 / 2021	